### FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL			
OMB Number:	3235-0076		
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Estimated average			
hours per response 16.00			

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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Sarissa Partners, L.P.		NOV 2 3 2007.
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE (C.)	HOMSON
A. BASIC IDENTIFICATION DATA	11/11	Wall was and
1. Enter the information requested about the issuer	111	VIIII POR
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Sarissa Partners, L.P.		
Address of Executive Offices (Number and Street, City, State, Zip Code) 530 Tigertail Road, Los Angeles, California 90049	Telephone Number (Includiation) 980-7688	ding Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Irich	ading Area Code)
Brief Description of Business Investment in securities.		
business trust   limited partnership, to be formed   Month Year	nated	07084182

# GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Sarissa Consulting, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 530 Tigertail Road, Los Angeles, California 90049 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Alexander Kendall Business or Residence Address (Number and Street, City, State, Zip Code) 530 Tigertail Road, Los Angeles, California 90049 General and/or Check Box(es) that Apply: Director Promoter Managing Partner Full Name (Last name first, if individual) Katherine McCabe Trust dtd 12/11/1996, Nancy McCabe, ttee Business or Residence Address (Number and Street, City, State, Zip Code) 449 17th St., Santa Monica, CA 90402 General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) William McCabe Trust dtd 12/11/1996, Nancy McCabe, ttee Business or Residence Address (Number and Street, City, State, Zip Code) 449 17th St., Santa Monica, CA 90402 Check Box(es) that Apply: Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Richard Kendall Business or Residence Address (Number and Street, City, State, Zip Code) 530 Tigertail Road, Los Angeles, CA 90049 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Christopher Kendall Business or Residence Address (Number and Street, City, State, Zip Code) 645 W. 9th St. #333, Los Angeles, CA 90015 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В, Т	NFORMAT	ION ABOU	T OFFERI	NG				
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes <b>X</b>	No ⊡				
	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?						. 750	0,000.00					
2.	What is	the minim	um investn	nent that w	vill be acce	pted from a	any individ	ual?	••••••••		***************************************	\$Yes	No
3.	Does th	e offering	permit join	t ownershi	ip of a sing	le unit?		••••••				<b>K</b>	
4.	commis If a pers or state:	sion or sim on to be lis s, list the na	ilar remune ted is an ass	ration for s sociated pe broker or de	solicitation erson or age ealer. If me	of purchase ent of a brok ore than five	ers in conne ter or dealc e (5) persor	ection with r registered ns to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state ons of such		
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)				<u></u>		
Nar	ne of As	sociated Br	oker or De	aler									
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)					· · · · · · · · · · · · · · · · · · ·		☐ AI	1 States
	IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street. C	City, State,	Zip Code)						
Nar	ne of As:	sociated Br	oker or De	aler		•							
Stat	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	***************************************	***************************************		••••••				1 States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check	"All States	or check	individual	States)	······				***************************************			l States
II. IN IA KS KY LA ME MD MA MI MN MS MT NE NV NH NJ NM NY NC ND OH OK OR							ID MO PA PR						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		\$
	Equity	<u> </u>	
	Common Preferred		
	Convertible Securities (including warrants)	<u> </u>	\$
	Partnership Interests	100,000,000.00	\$ 8,000,000.00
	Other (Specify)		\$
	Total	100,000,000.00	\$ 8,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$ 8,000,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Blue Sky filing fees	<b></b>	\$_300.00
	Total	_	\$ 300.00

C. OFFERING	PRICE, NUMBER OF INVESTORS, EXPENSI	ES AND USE OF PROCEEDS					
and total expenses furnished in respons	ggregate offering price given in response to Pare e to Part C — Question 4.a. This difference is t	the "adjusted gross	99,999,700.00				
each of the purposes shown. If the a check the box to the left of the estimate	sted gross proceed to the issuer used or propo imount for any purpose is not known, furnisl e. The total of the payments listed must equal to ponse to Part C — Question 4.b above.	h an estimate and					
		Payments to Officers, Directors, & Affiliates	Payments to Others				
Salaries and fees							
Purchase of real estate		\$ 0.00	_ [ \$_0				
and equipment	Purchase, rental or leasing and installation of machinery and equipment						
Construction or leasing of plant build	dings and facilities	\$ <u>0.00</u>	\$\ \ 0.00 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
offering that may be used in exchang	uding the value of securities involved in this e for the assets or securities of another		s0.00				
			\$\ \ 0.00 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Working capital	Working capital						
Other (specify): Portfolio investment	nt in securities.	s 0.00	\$_99,999,700.00				
			. [] \$				
Column Totals		<b>—</b>					
Total Payments Listed (column totals	Z \$ <u>9</u>	9,999,700.00					
	D. FEDERAL SIGNATURI	E					
signature constitutes an undertaking by the	signed by the undersigned duly authorized per e issuer to furnish to the U.S. Securities and E any non-accredited investor pursuant to par	Exchange Commission, upon writte					
Issuer (Print or Type)	Signature	Date					
Sarissa Partners, L.P.		November 6	<b>(</b> , 2007				
Name of Signer (Print or Type)	Title of Signer (Print or Type	)					
Alexander Kendall	President, Sarissa Consulting	g, LLC, General Partner of Issue	r				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)